

Vermont Mental Health Performance Indicator Project

DDMHS, Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601 (802-241-2638)

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani and Monica Simon

DATE: March 16, 2001

RE: Movement of CRT Clients Among Agencies

During the past few weeks we have received two enquiries related to movement of CRT clients among Designated Agencies. In response to these enquires we have replicated an analysis that was originally conducted during the fall of 1998. This analysis was designed to provide a partial test of the "magnet program" hypothesis. This hypothesis holds that certain local programs, due to the quality of care they provide, will attract clients from other local programs. In recent years, this hypothesis has been most evident with regard to public education (magnet schools), but has been raised with regard to mental health programs as well.

In order to measure the amount of movement of clients among local CRT programs, the number of individuals who were served by a specified CRT program during FY2000 who were also served by a different CRT program during the previous three years was measured. The results of this calculation were expressed both as a percent of the FY2000 caseload for the agency, and as a per-capita rate based on the total population of the service area. For instance, the CRT program in Addison County served 170 people during FY2000. Fifty-four of those people (32%) had been served by another CRT program during the previous three years. Expressed as a per-capita rate these clients account for 21 of every 10,000 residents of Addison County. These computations were repeated for each local CRT program for each of two base years (FY1997 and FY2000). Because Vermont's CRT programs did not report statewide unique person identifiers to DDMHS during this period, Probabilistic Population Estimation was used to determine the amount of caseload overlap.

As you will see, there was substantial variation in the proportion of CRT clients at different local programs who had been served by another local agency during the previous three years. It is also interesting to note that these proportions tend to be similar during the two time periods under examination. During both time periods, more than 20% of the CRT clients served in Addison, Lamoille and Orange counties had been on the caseload of another CRT program during the previous three years. These were significantly higher rates than at any other CRT program. The proportion of CRT clients

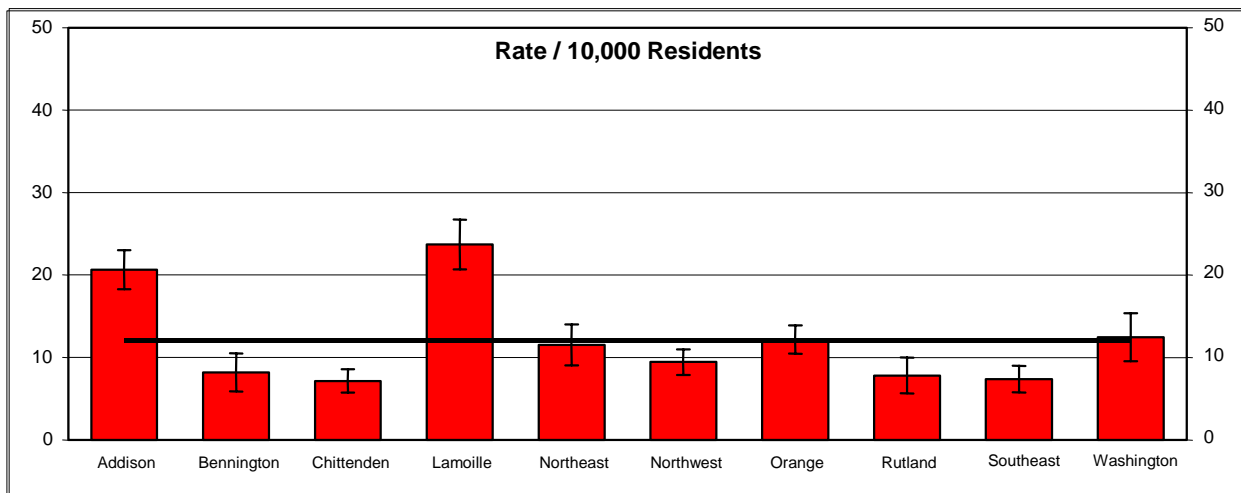
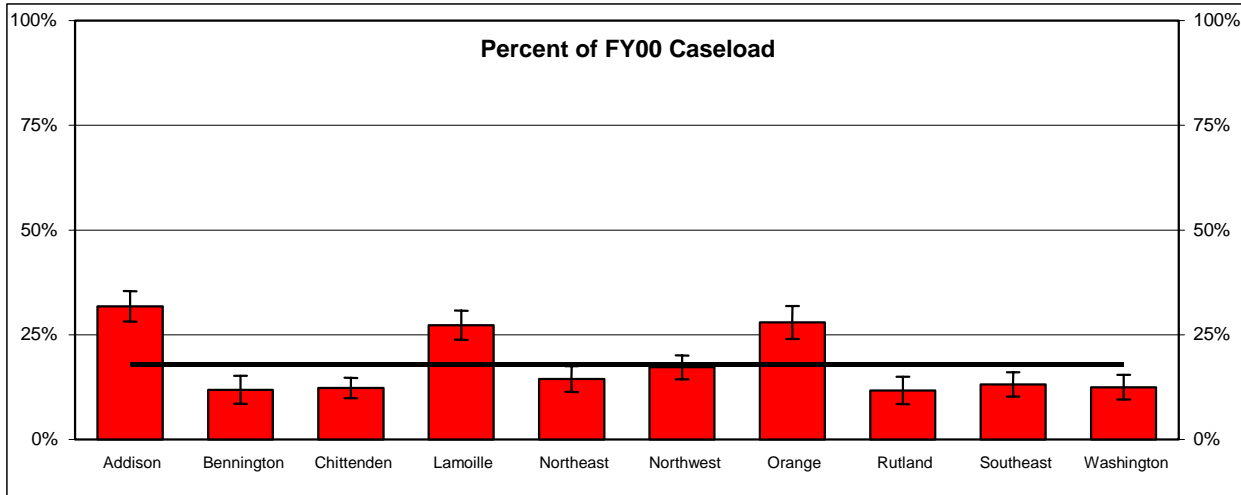
at five other agencies was significantly lower than the statewide rate. These agencies were Bennington, Chittenden, Rutland, Southeast, and Washington.

When movement of CRT clients is compared to the overall population of the service areas, similar patterns are evident. During both time periods, Addison and Lamoille Counties' per-capita representation of CRT clients who had been on the caseload of another CRT program during the previous three years was higher than the statewide average. The per-capita representation of CRT clients at five agencies was significantly lower than the statewide rate. These agencies were Bennington, Chittenden, Northwest, Rutland, and Southeast.

This analysis was undertaken as a test of the "magnet program" hypothesis. The data indicate that there are consistent patterns of movement of clients among CRT programs in Vermont. Would you interpret these patterns to indicate the existence of magnet programs? Can these findings be interpreted from other perspectives? Are there other analyses that would add to our understanding of patterns of movement of clients among CRT programs in Vermont?

We look forward to your comments and suggestions to jpandiani@ddmhs or call 802-241-2638.

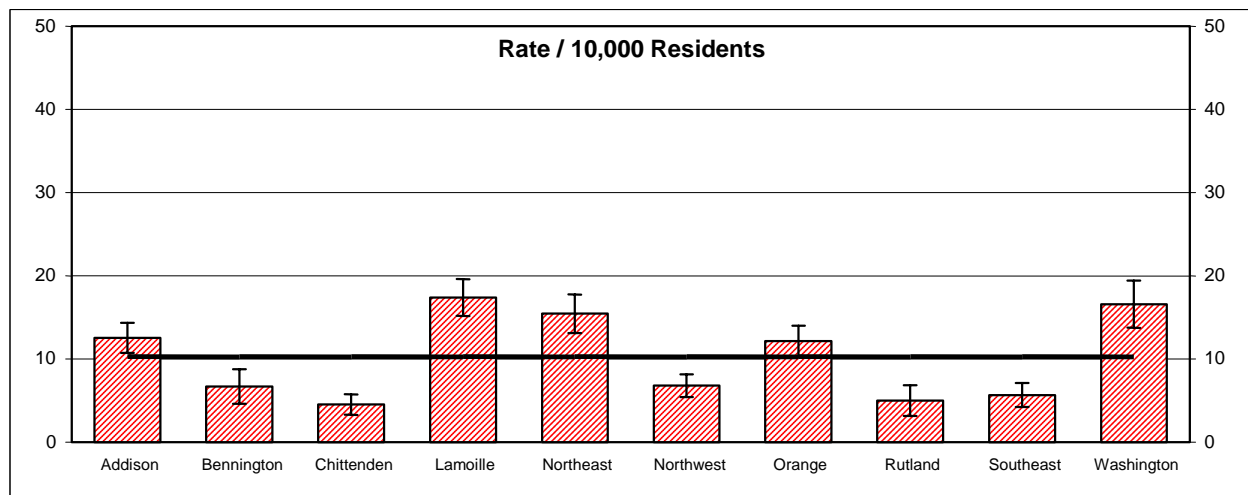
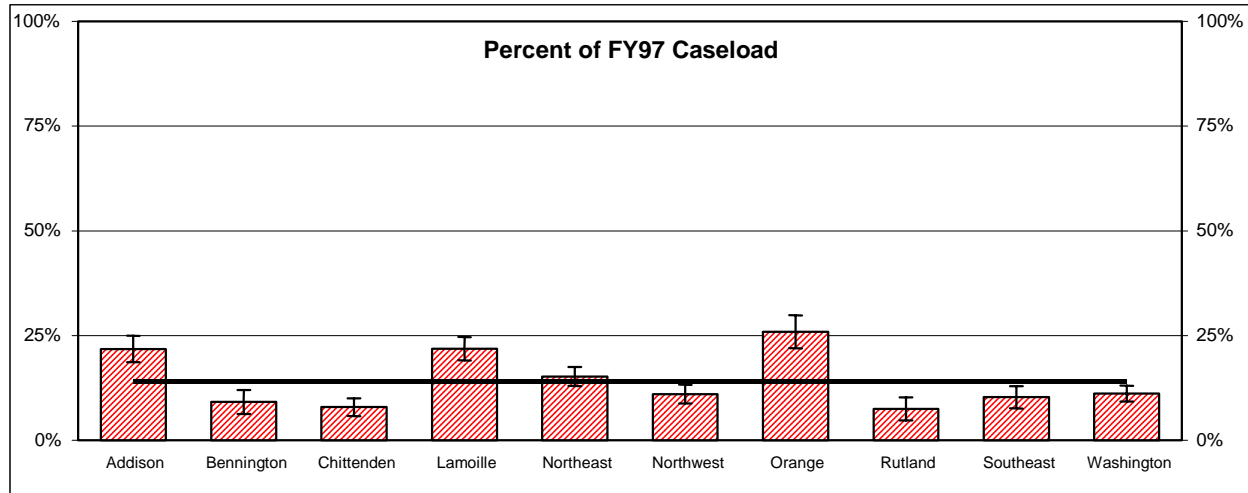
Movement of CRT Caseload
Clients Previously Served by Another CRT Program
FY 2000 Caseload of Specified Agency who were Served by Another Agency during FY 1997-1999



	FY 2000 Clients Served	Served by another CRT Program during FY 1997 - 1999					
		Number of Clients		Percent of FY00 Caseload		Rate / 10,000 Residents	
		Number	95 % CI	Percent	95% CI	Rate	95% CI
Addison	170	54	48 - 60	32%	28% - 35%	21	18 - 23
Bennington	189	22	16 - 29	12%	9% - 15%	8	6 - 11
Chittenden	658	81	65 - 97	12%	10% - 15%	7	6 - 9
Lamoille	145	40	35 - 45	27%	24% - 31%	24	21 - 27
Northeast	372	54	42 - 65	14%	11% - 18%	12	9 - 14
Northwest	203	35	29 - 41	17%	14% - 20%	9	8 - 11
Orange	116	32	28 - 37	28%	24% - 32%	12	10 - 14
Rutland	324	38	27 - 48	12%	8% - 15%	8	6 - 10
Southeast	390	51	40 - 63	13%	10% - 16%	7	6 - 9
Washington	433	54	41 - 67	12%	10% - 15%	12	10 - 15

Number of people served is based on quarterly service reports submitted by Vermont's community providers and includes people assigned to CRT programs. Population figures are projections for 1999 based on estimates published by the Vermont Department of Health and the Center for Rural Studies at the University of Vermont. Adult population includes Vermont resident 18 years and older. Estimates of the number of people served across providers are based on the probabilistic population estimation method. The shaded area at the top of each bar represents the 95% confidence interval. The solid line represents the statewide average.

Movement of CRT Caseload
Clients Previously Served by Another CRT Program
FY 1997 Caseload of Specified Agency who were Served by Another Agency during FY 1994-1996



	FY 1997 Clients Served	Served by another CRT Program during FY 1994 - 1996					
		Number of Clients		Percent of FY97 Caseload		Rate / 10,000 Residents	
		Number	95 % CI	Percent	95% CI	Rate	95% CI
Addison	148	32	28 - 37	22%	19% - 25%	13	11 - 14
Bennington	197	18	12 - 24	9%	6% - 12%	7	5 - 9
Chittenden	629	49	36 - 63	8%	6% - 10%	5	3 - 6
Lamoille	129	28	25 - 32	22%	19% - 25%	17	15 - 20
Northeast	455	69	59 - 80	15%	13% - 18%	15	13 - 18
Northwest	217	24	19 - 29	11%	9% - 13%	7	5 - 8
Orange	120	31	26 - 36	26%	22% - 30%	12	10 - 14
Rutland	319	24	15 - 33	7%	5% - 10%	5	3 - 7
Southeast	376	39	29 - 49	10%	8% - 13%	6	4 - 7
Washington	639	71	59 - 83	11%	9% - 13%	17	14 - 19

Number of people served is based on quarterly service reports submitted by Vermont's community providers and includes people assigned to CRT programs. Population figures are projections for 1996 based on estimates published by the Vermont Department of Health and the Center for Rural Studies at the University of Vermont. Adult population includes Vermont resident 18 years and older. Estimates of the number of people served across providers are based on the probabilistic population estimation method. The shaded area at the top of each bar represents the 95% confidence interval. The solid line represents the statewide average.

Movement of CRT
Clients Previously Served by Another CRT
 Percent of FY 1997 and FY 2000 Caseloads of Specified Agency
 who were Served by Another Agency during the Previous 3 years

